Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
MIDDLE DISTRICT OF FLORIDA	-	
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself					
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
1.	Your full name					
Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.		Carlos First name Alberto Middle name Lindo Last name and Suffix (Sr., Jr., II, III)	First name Middle name Last name and Suffix (Sr., Jr., II, III)			
2.	All other names you have used in the last 8 years	Carlos Alberto Lindo, II				
	Include your married or maiden names.	·				
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-5990				

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Debtor 1 Carlos Alberto Lindo

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):				
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs. Business name(s) EINs	☐ I have not used any business name or EINs. Business name(s) EINs				
5.	Where you live	1256 Tangerine Drive	If Debtor 2 lives at a different address:				
		Saint Johns, FL 32259 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code				
		Saint Johns County	County				
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.				
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code				
6.	Why you are choosing this district to file for	Check one:	Check one:				
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.				
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)				

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Deb	otor 1 Carlos Alberto Lin	do			Case number (if known)				
Par	t 2: Tell the Court About	our Bank	cruptcy Ca	se					
7.	The chapter of the Bankruptcy Code you are choosing to file under	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.							
	oncoming to the under	Chap	ter 7						
		☐ Chap	ter 11						
		☐ Chap	ter 12						
		☐ Chap	ter 13						
8.	How you will pay the fee	abo	I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, o order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or che a pre-printed address.						
				the fee in installments. If ye in Installments (Official For		e this option, sign	and attach the Applica	ation for Individuals to Pay	
		☐ I re	equest tha t is not requ	t my fee be waived (You ma	y request may do so	only if your inco	me is less than 150% of	of the official poverty line that	
				n to Have the Chapter 7 Filin					
9.	Have you filed for	□ No.							
	bankruptcy within the last 8 years?	Yes.							
			District	Middle District of Florida	When	2/06/17	Case number	3:17-bk-392	
			District	Middle District of Florida	When	2/14/15	Case number	3:15-bk-4274	
			District		When		Case number		
10.	Are any bankruptcy cases pending or being	■ No							
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.							
			Debtor				Relationship to y	ou	
			District		_ When		Case number, if	known	
			Debtor				Relationship to y	ou	
			District		_ When		Case number, if	known	
11.	Do you rent your residence?	■ No.	Go to li	ne 12.					
	residence:	☐ Yes.	Has yo	ur landlord obtained an evicti	on judgm	ent against you?			
				No. Go to line 12.					
				Yes. Fill out <i>Initial Statemen</i> bankruptcy petition.	t About ar	n Eviction Judgme	ent Against You (Form	101A) and file it with this	

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Der	Carlos Alberto Lin	100		Case number (if known)			
Par	Report About Any Bu	sinesses	You Own as a Sole Proprie	etor			
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part 4.				
		☐ Yes.	Name and location of bu	siness			
	A sole proprietorship is a						
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if any				
	If you have more than one sole proprietorship, use a separate sheet and attach		Number, Street, City, Sta	ate & ZIP Code			
	it to this petition.		Check the appropriate be	ox to describe your business:			
			☐ Health Care Busi	ness (as defined in 11 U.S.C. § 101(27A))			
			☐ Single Asset Rea	Il Estate (as defined in 11 U.S.C. § 101(51B))			
			☐ Stockbroker (as o	defined in 11 U.S.C. § 101(53A))			
			☐ Commodity Broke	er (as defined in 11 U.S.C. § 101(6))			
			☐ None of the above	re			
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline operation in 11 U.S	s. If you indicate that you are as, cash-flow statement, and s.C. 1116(1)(B).	court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of federal income tax return or if any of these documents do not exist, follow the procedure			
	For a definition of small	No.	I am not filing under Chapter 11.				
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition Code.				
		☐ Yes.	I am filing under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.			
Par	t 4: Report if You Own or	Have Any	Hazardous Property or Ar	ny Property That Needs Immediate Attention			
14.	Do you own or have any	■ No.					
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is the hazard?				
	public health or safety? Or do you own any property that needs immediate attention?		If immediate attention is needed, why is it needed?				
	For example, do you own						
	perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?				
	-			Number, Street, City, State & Zip Code			

Debtor 1 Carlos Alberto Lindo

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Deb	tor 1 Carlos Alberto Lir	Case number (if known)							
Part	6: Answer These Quest	ions for R	eporting Purposes						
16.	What kind of debts do you have?	16a.	Are your debts primarily cindividual primarily for a per		s? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an r household purpose."				
			☐ No. Go to line 16b.						
			Yes. Go to line 17.						
		16b.	Are your debts primarily b	Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.					
			□ No. Go to line 16c.	estillerit of throught the	operation of the	e business of investine	iii.		
			_						
		40-	Yes. Go to line 17.			ainana dabta			
		16c.	State the type of debts you	owe that are not consu	mer debts or bus	Siness debis			
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapte	er 7. Go to line 18.					
	Do you estimate that after any exempt property is excluded and	■ Yes.	I am filing under Chapter 7. are paid that funds will be a				nd administrative expenses		
	administrative expenses		■ No						
	are paid that funds will be available for		□Yes						
	distribution to unsecured creditors?		_ 165						
18.	How many Creditors do	■ 1-49		□ 1,000-5,000)	□ 25,001-5	50 000		
	you estimate that you	☐ 50-99)	☐ 5001-10,00		□ 50,001-1			
	owe?	☐ 100-1		1 0,001-25,0	000	☐ More that	ın100,000		
		□ 200-9	199						
19.	How much do you	□ \$0 - \$	550,000	□ \$1,000,001	- \$10 million	□ \$500,00	0,001 - \$1 billion		
	estimate your assets to be worth?		001 - \$100,000	\$10,000,00			000,001 - \$10 billion		
			,001 - \$500,000		1 - \$100 million 01 - \$500 million		,000,001 - \$50 billion an \$50 billion		
		□ \$500,	,001 - \$1 million	— \$100,000,00	στ - φοσο million	i inore trie			
20.	How much do you	□ \$0 - \$		□ \$1,000,001			0,001 - \$1 billion		
	estimate your liabilities to be?		001 - \$100,000	□ \$10,000,00°			000,001 - \$10 billion		
			,001 - \$500,000	_ + , ,	1 - \$100 million 01 - \$500 million),000,001 - \$50 billion an \$50 billion		
		— \$500,	01 - \$1 million ☐ \$100,000,001 - \$500 m		- φοσο πιιιιστι				
Part	Sign Below								
For	you	I have ex	kamined this petition, and I de	eclare under penalty of	perjury that the i	information provided is	true and correct.		
			chosen to file under Chapter tates Code. I understand the						
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).							
		I request	t relief in accordance with the	chapter of title 11, Unit	ed States Code,	, specified in this petition	on.		
		bankrupt and 357							
			os Alberto Lindo		Olama - true (5	Nahtan O			
			Alberto Lindo e of Debtor 1		Signature of D	veptor 2			
		Executed	d on December 11, 2017	,	Executed on				
			MM / DD / YYYY			MM / DD / YYYY			
						= = ,			

	Case 3:17-0K-04213-JAF DOC 3	r Filed 12/11/17	Page 7 01 54
Debtor 1 Carlos Alberto L	indo	Case	e number (if known)
For your attorney, if you are represented by one	under Chapter 7, 11, 12, or 13 of title 11, United	d States Code, and have ex	informed the debtor(s) about eligibility to proceed explained the relief available under each chapter ebtor(s) the notice required by 11 U.S.C. § 342(b)
If you are not represented by an attorney, you do not need to file this page.	and, in a case in which § 707(b)(4)(D) applies,		ledge after an inquiry that the information in the
, -	/s/ Bryan K. Mickler FBN	Date	December 11, 2017
	Signature of Attorney for Debtor		MM / DD / YYYY
	Bryan K. Mickler FBN 091790		
	Printed name		
	Law Offices of Mickler & Mickler, LLP		
	5452 Arlington Expy.		
	Jacksonville. FL 32211		
	Number, Street, City, State & ZIP Code		
	Contact phone	Email address	

091790

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Fill	in this information to identify your case:		
Deb	tor 1 Carlos Alberto Lindo First Name Middle Name Last Name		
	tor 2		
``	use if, filing) First Name Middle Name Last Name Last Name		
Unit	ed States Bankruptcy Court for the: MIDDLE DISTRICT OF FLORIDA		
Cas (if kn	e number	_	ck if this is an nded filing
	icial Form 106Sum		
	mmary of Your Assets and Liabilities and Certain Statistical Information s complete and accurate as possible. If two married people are filing together, both are equally responsible for	r supply	12/15 ina correct
info	mation. Fill out all of your schedules first; then complete the information on this form. If you are filing amendoriginal forms, you must fill out a new <i>Summary</i> and check the box at the top of this page.		
Par	<u> </u>		
			assets
		Value	of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	311,582.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	3,335.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	314,917.00
Par	2: Summarize Your Liabilities		
		Your	liabilities
		Amou	int you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	184,262.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	3,005.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	48,988.49
	Your total liabilities	\$	236,255.49
Par	3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	916.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	3,884.00
Par	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other s	chedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	a persona	al, family, or
	Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this the court with your other schedules.	box and	submit this form to

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

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Debtor 1 Carlos Alberto Lindo

Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

2,135.15

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Tota	al claim
9a. Domestic support obligations (Copy line 6a.)	\$_	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$_	3,005.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$_	0.00
9d. Student loans. (Copy line 6f.)	\$_	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$_	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$_	0.00
9g. Total. Add lines 9a through 9f.	\$	3,005.00

	Case 3:17	-DK-U421	კ-JA	r Doc	r Filed 1	12/11/17	Page	10 01 54			
Fill in this inform	mation to identify your	case and this	s filinç	g:							
Debtor 1	Carlos Alberto Li	indo Middle 1	Name		Last Name						
Debtor 2 (Spouse, if filing)	First Name	Middle 1	Name		Last Name						
United States Ba	ankruptcy Court for the:	MIDDLE DIS	STRIC	T OF FLORIDA	A						
Case number _					_					Check if this is an amended filing	
Official Fo	orm 106A/B										
_	le A/B: Prop	erty								12/15	
think it fits best. B information. If mor Answer every ques		ate as possible a separate she	. If two eet to ti	married people his form. On th	e are filing toge e top of any add	ther, both are ditional pages	equally resp	onsible for su	pplyii	ng correct	
Part 1: Describe	Each Residence, Building	g, Land, or Oth	er Real	Estate You Ov	vn or Have an In	nterest In					
1.1 1256 Tang	Yes. Where is the property? 1 1256 Tangerine Drive Street address, if available, or other description		Duplex or multi-unit building				the amount Creditors V	not deduct secured claims or exemptions. Put amount of any secured claims on Schedule D: editors Who Have Claims Secured by Property.			
Saint Joh		259-0000					Current va	erty?		rent value of the tion you own?	
City	State	ZIP Code		Investment pro Timeshare Other	operty		\$311,582.00 Describe the nature of your (such as fee simple, tenand				
Saint Joh	ns		Who ■ □	has an interest Debtor 1 only Debtor 2 only	t in the property	? Check one	Fee simple Check if this is community property				
County	-		□ □ Othe	Debtor 1 and At least one o	f the debtors and					ty property	
				closed on 1							
	lar value of the portion nave attached for Part 1									\$311,582.00	

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

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Debt	tor 1 <u>C</u>	arlos Alber	to Lindo		Case number (i	if known)	
3. C a	ars, vans,	trucks, tract	ors, sport utility ve	hicles, motorcycles			
	No						
_							
	Yes						
0.4		Chevrolet	•	William Control of the Control of th	Do not d	educt secured c	aims or exemptions. Put
3.1	Make:	Avalanch		Who has an interest in the property? Check one	the amou	unt of any secure	ed claims on Schedule D: ims Secured by Property.
	Model: Year:	2003		Debtor 1 only			, , ,
		nate mileage:	207000	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	Current entire pr	value of the roperty?	Current value of the portion you own?
		ormation:	207000	☐ At least one of the debtors and another	ontil o pi	oporty.	portion you own.
	Location	on: 1256 Ta	ngerine Drive,				
	Saint J	ohns FL 32	259	☐ Check if this is community property		\$1,375.00	\$1,375.00
				(see instructions)			
					Do not d	aduat accurad a	laima ar avamations. Dut
3.2	Make:	Buick		Who has an interest in the property? Check one			aims or exemptions. Put ed claims on Schedule D:
	Model:	LeSabre		Debtor 1 only	Creditors	s Who Have Clai	ims Secured by Property.
	Year:	2004		Debtor 2 only		value of the	Current value of the
		nate mileage:	200,000	Debtor 1 and Debtor 2 only	entire pr	roperty?	portion you own?
		ormation:	nanina Driva	At least one of the debtors and another			
		ohns FL 32	ngerine Drive,	☐ Check if this is community property		\$495.00	\$495.00
	June	011110 1 2 02	.200	(see instructions)			
				n for all of your entries from Part 2, including a			\$1,870.00
	g ,						
Part	3: Descri	be Your Persor	nal and Household Ite	ems			
Do y	ou own c	r have any le	egal or equitable int	terest in any of the following items?			Current value of the
							portion you own? Do not deduct secured
							claims or exemptions.
		goods and fu	urnishings ces, furniture, linens.	china kitchenware			
	l No	,		,			
	Yes. De	scribe					
				6 chairs, bedroom set, stove, refrigerator,	, washer		
			and dryer, kitch	en items Tangerine Drive, Saint Johns FL 32259			\$500.00
			2004	- angomo 21110, Cami Comio : 2 02200			· · · · · · · · · · · · · · · · · · ·
E	l No	Televisions ar including cell		eo, stereo, and digital equipment; computers, print nedia players, games	ters, scanners;	music collecti	ons; electronic devices
	Yes. De	scribe					
			1 tv set				
				Tangerine Drive, Saint Johns FL 32259			\$50.00

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De	ebtor 1 Carlos Albe	erto Lindo Case number (if i	known)
В.		d figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stam tions, memorabilia, collectibles	p, coin, or baseball card collections;
	■ No □ Yes. Describe		
9.	Equipment for sports <i>Examples:</i> Sports, phore musical instance.	tographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; c	anoes and kayaks; carpentry tools;
	■ No □ Yes. Describe		
	Firearms	es, shotguns, ammunition, and related equipment	
	■ No □ Yes. Describe		
11.	Clothes Examples: Everyday o	clothes, furs, leather coats, designer wear, shoes, accessories	
	Yes. Describe		
		clothing Location: 1256 Tangerine Drive, Saint Johns FL 32259	\$50.00
12.	Jewelry Examples: Everyday j □ No ■ Yes. Describe	ewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, ç	gems, gold, silver
		watch Location: 1256 Tangerine Drive, Saint Johns FL 32259	\$60.00
13.	Non-farm animals Examples: Dogs, cats	, birds, horses	
	■ No □ Yes. Describe		
14.	Any other personal a	nd household items you did not already list, including any health aids you did not	list
	☐ Yes. Give specific in	nformation	
15		e of all of your entries from Part 3, including any entries for pages you have attach t number here	sed \$660.00
Pa	art 4: Describe Your Fina	ncial Assets	
Do	o you own or have any	legal or equitable interest in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	■ No	ມ have in your wallet, in your home, in a safe deposit box, and on hand when you file you	ur petition
17	Deposits of money		
	Examples: Checking,	savings, or other financial accounts; certificates of deposit; shares in credit unions, broks. If you have multiple accounts with the same institution, list each.	erage houses, and other similar
	■ Yes	Institution name:	

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De	ebtor 1	Carlos Alber	to Lind	0		Case number (if known)	

_			17.1.	checking	Wells Fargo Bank		\$200.00
			17.2.	checking	Vystar Checking		\$400.00
			17.3.	savings	Vystar		\$5.00
18.	_Examp			cly traded stocks ent accounts with bro	okerage firms, money market acco	bunts	
	■ No □ Yes			Institution or issuer	name:		
19.		ublicly traded strenture	ock and	interests in incorpo	orated and unincorporated busi	inesses, including an interest in an LLC, pa	artnership, and
		Give specific info		about them me of entity:		% of ownership:	
20.	Negoti	iable instruments	include p	personal checks, cas	otiable and non-negotiable instrustries in the structure of the structure	and money orders.	
		Give specific info		about them uer name:			
21.		ment or pension ples: Interests in I			403(b), thrift savings accounts, or c	other pension or profit-sharing plans	
	■ No □ Yes.	List each accoun		ely. of account:	Institution name:		
22.	Your s		d deposit	ts you have made so	that you may continue service or public utilities (electric, gas, water	use from a company r), telecommunications companies, or others	
					Institution name or individu	ual:	
23.	_	ies (A contract fo	r a perio	dic payment of mone	ey to you, either for life or for a nur	mber of years)	
	■ No □ Yes	ls:	suer nam	e and description.			
24.		ts in an education C. §§ 530(b)(1), §			ualified ABLE program, or unde	er a qualified state tuition program.	
	Yes	In:	stitution r	name and description	n. Separately file the records of an	ny interests.11 U.S.C. § 521(c):	
	■ No	•			ther than anything listed in line	1), and rights or powers exercisable for y	our benefit
		Give specific info					
26.					nd other intellectual property eds from royalties and licensing ag	reements	
	☐ Yes.	Give specific info	ormation	about them			
27.				r general intangible lusive licenses, coop	es perative association holdings, liquo	or licenses, professional licenses	
	Yes.	Give specific info	ormation	about them			

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Debtor 1	Carlos Alberto Lindo		C	case number (if known)	
	Cos	metolegy license			\$0.00
	<u>-</u>				
Money o	or property owed to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.
28. Tax r ■ No	refunds owed to you				
☐ Ye	s. Give specific information about	them, including whether you alrea	dy filed the returns and	d the tax years	
<i>Exai</i> □ No	•	nony, spousal support, child suppor	t, maintenance, divord	ce settlement, property s	settlement
		receives child support - c	urrent	child support	\$0.00
Exai	benefits; unpaid loans you	surance payments, disability bene made to someone else	fits, sick pay, vacation	pay, workers' compens	sation, Social Security
31. Inter	ests in insurance policies	surance; health savings account (H	SA); credit, homeown	er's, or renter's insuranc	ce
■ No		,	,,		
☐ Ye	s. Name the insurance company Compan		Beneficiary	y:	Surrender or refund value:
If yo		you from someone who has died ust, expect proceeds from a life ins		currently entitled to recei	ve property because
■ No					
⊔ Ye	s. Give specific information				
Exa	mples: Accidents, employment dis	er or not you have filed a lawsuit sputes, insurance claims, or rights		or payment	
■ No □ Ye	s. Describe each claim				
34. Othe ■ No	- · · · · · · · · · · · · · · · · · · ·	claims of every nature, including	counterclaims of the	e debtor and rights to	set off claims
	s. Describe each claim				
35. Any 1	financial assets you did not alr	eady list			
■ Ye	s. Give specific information				
		2 shampoo bowls, chair, ha Location: 1256 Tangerine D			\$200.00
		entries from Part 4, including an			\$805.00

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Debtor '	Carlos Alberto Lindo		Case number (if known)	
Part 5:	Describe Any Business-Related Property You Own or Have an Intere	est In. List any real esta	ate in Part 1.	
37. Do y o	ou own or have any legal or equitable interest in any business-related	d property?		
No.	Go to Part 6.			
☐ Yes	s. Go to line 38.			
	Describe Any Farm- and Commercial Fishing-Related Property You of If you own or have an interest in farmland, list it in Part 1.	Own or Have an Interes	st In.	
46. Do y	you own or have any legal or equitable interest in any farm-	or commercial fishir	ng-related property?	
1	No. Go to Part 7.			
	Yes. Go to line 47.			
Part 7:	Describe All Property You Own or Have an Interest in That You	Did Not List Above		
Exa ■ No				
Ll Y€	es. Give specific information			
54. Ad	ld the dollar value of all of your entries from Part 7. Write tha	t number here		\$0.00
Part 8:	List the Totals of Each Part of this Form			
55. Pa	rt 1: Total real estate, line 2			\$311,582.00
56. Pa	rt 2: Total vehicles, line 5	\$1,870.00		
57. Pa	rt 3: Total personal and household items, line 15	\$660.00		
58. Pa	rt 4: Total financial assets, line 36	\$805.00		
	rt 5: Total business-related property, line 45	\$0.00		
	rt 6: Total farm- and fishing-related property, line 52	\$0.00		
61. Pa	rt 7: Total other property not listed, line 54 +	\$0.00		
62. To	tal personal property. Add lines 56 through 61	\$3,335.00	Copy personal property tota	\$3,335.00
63 To	tal of all property on Schedule A/B. Add line 55 + line 62			\$314 Q17 QQ

							•
		nation to identify your ca					
De	btor 1	Carlos Alberto Line First Name		e Name	L	ast Name	
	btor 2						
(Sp	ouse if, filing)	First Name		e Name		ast Name	
Un	ited States Ba	nkruptcy Court for the:	MIDDLE	DISTRICT OF FLO	RIDA	<u> </u>	
	se number nown)						Check if this is an amended filing
Oi	fficial Fo	rm 106C					
S	chedul	e C: The Pro	perty	y You Cla	im	as Exempt	4/16
the nee cas	property you li ded, fill out and e number (if kr	sted on <i>Schedule A/B: Pro</i> d attach to this page as mown).	operty (Of any copie	ficial Form 106A/B) s of <i>Part 2: Additior</i>	as yo nal Pa	our source, list the property that you age as necessary. On the top of any	additional pages, write your name and
spe any fun exe	ecific dollar and applicable st ds—may be u emption to a p	nount as exempt. Alternatutory limit. Some exem nlimited in dollar amour	atively, yo nptions— nt. Howev	ou may claim the f such as those for er, if you claim an	ull fai heal exen	th aids, rights to receive certain b nption of 100% of fair market valu	ing exempted up to the amount of penefits, and tax-exempt retirement
Pa	rt 1: Identif	y the Property You Clair	n as Exei	npt			
1.	Which set of	exemptions are you cla	iming? C	heck one only, eve	n if yo	our spouse is filing with you.	
	You are cla	aiming state and federal n	onbankru	otcv exemptions. 1	11 U.S	S.C. § 522(b)(3)	
	_	aiming federal exemptions		,			
2.				• ()()	mpt.	fill in the information below.	
	• • •	on of the property and line		urrent value of the		ount of the exemption you claim	Specific laws that allow exemption
	Schedule A/B	that lists this property	·	ortion you own	01-		
				opy the value from chedule A/B	CHE	eck only one box for each exemption.	
		e w/6 chairs, bedroon gerator, washer and d		\$500.00		\$500.00	Fla. Const. art. X, § 4(a)(2)
	kitchen iter Location: 1 Johns FL 3	ns 256 Tangerine Drive, 2259				100% of fair market value, up to any applicable statutory limit	
	Line from Sch	nedule A/B: 6.1					
	1 tv set Location: 1	256 Tangerine Drive,	Saint —	\$50.00		\$50.00	Fla. Const. art. X, § 4(a)(2)
	Johns FL 3					100% of fair market value, up to any applicable statutory limit	
	clothing Location: 1	256 Tangerine Drive,	Saint —	\$50.00		\$50.00	Fla. Const. art. X, § 4(a)(2)
	Johns FL 3					100% of fair market value, up to any applicable statutory limit	
	watch Location: 1	256 Tangerine Drive.	Saint —	\$60.00		\$60.00	Fla. Const. art. X, § 4(a)(2)

Johns FL 32259

Line from Schedule A/B: 12.1

□ 100% of fair market value, up to

any applicable statutory limit

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De	ebtor 1 Carlos Alberto Lindo		Case number (if known)				
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B Amount of the exemption you claim Specific laws that a specific		Specific laws that allow exemption			
	2 shampoo bowls, chair, hair styling supplies	\$200.00	\$200.00	Fla. Const. art. X, § 4(a)(2)			
	Location: 1256 Tangerine Drive, Saint Johns FL 32259 Line from Schedule A/B: 35.1		100% of fair market value, up to any applicable statutory limit				
3.	Are you claiming a homestead exemption of (Subject to adjustment on 4/01/19 and every 3			nt.)			
	■ No						
	☐ Yes. Did you acquire the property covered	d by the exemption wi	thin 1,215 days before you filed this case	?			
	□ No						
	☐ Yes						

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Fill in this informati	on to identify you	r case:			
	Carlos Alberto I	_indo			
	First Name	Middle Name Last Name			
Debtor 2 (Spouse if, filing)	First Name	Middle Name Last Name		-	
United States Bankru	uptcy Court for the:	MIDDLE DISTRICT OF FLORIDA		-	
Case number					if this is an led filing
Official Form 1	06D			amene	ica ming
		What Have Olaine Coore	l le D		
Schedule D:	Creditors	Who Have Claims Secure	ea by Propert	<u>y</u>	12/15
		If two married people are filing together, both are out, number the entries, and attach it to this form			
1. Do any creditors hav	e claims secured by	your property?			
☐ No. Check this	s box and submit th	nis form to the court with your other schedules.	. You have nothing else t	to report on this form.	
Yes. Fill in all	of the information	below.			
Part 1: List All Se	ecured Claims				
		nore than one secured claim, list the creditor separat	Column A	Column B	Column C
for each claim. If more	than one creditor has	a particular claim, list the other creditors in Part 2. A cal order according to the creditor's name.		Value of collateral that supports this claim	Unsecured portion If any
2.1 Nationstar M	ortgage LLC	Describe the property that secures the claim:	\$184,262.00	\$311,582.00	\$0.00
Attn: Bankru 8950 Cypres: Blvd Coppell, TX 7	s Waters	1256 Tangerine Drive Saint Johns, FL 32259 Saint Johns County foreclosed on 11/2017 As of the date you file, the claim is: Check all that apply.			
Number, Street, City		☐ Contingent ☐ Unliquidated ☐ Disputed			
Who owes the debt?	Check one.	Nature of lien. Check all that apply.			
☐ Debtor 1 only ☐ Debtor 2 only		☐ An agreement you made (such as mortgage or car loan)	secured		
Debtor 1 and Debtor	r 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)	1		
At least one of the d	ebtors and another	☐ Judgment lien from a lawsuit			
Check if this claim community debt	relates to a	Other (including a right to offset) First Mo	rtgage		
	Opened 02/07 Last Active				
Date debt was incurre	d 10/11/16	Last 4 digits of account number 397	4		
SportNobles	Construction	Describe the property that secures the claim:	\$0.00	\$311,582.00	\$0.00
Creditor's Name		1256 Tangerine Drive Saint Johns,	1		
	_	FL 32259 Saint Johns County foreclosed on 11/2017 As of the date you file, the claim is: Check all that			
4716 Palmer Jacksonville		apply.			
Number, Street, City	-	☐ Contingent ☐ Unliquidated			
Who owes the debt?	Check one.	☐ Disputed Nature of lien. Check all that apply.			
☐ Debtor 1 only☐ Debtor 2 only		☐ An agreement you made (such as mortgage or car loan)	secured		
Debtor 1 and Debtor	r 2 only	☐ Statutory lien (such as tax lien, mechanic's lien))		
At least one of the d	-	☐ Judgment lien from a lawsuit			

Official Form 106D

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Debtor 1	Carlos Alberto L	indo		Case number (if know)		
	First Name	Middle Name	Last Name			
	if this claim relates to nunity debt	a Other (in	ncluding a right to offset)			
Date debt	was incurred	Last	4 digits of account number			
Add the	dollar value of your er	ntries in Column A on t	his page. Write that number h	here: \$184,262.00		
If this is the last page of your form, add the dollar value totals from all pages. Write that number here:			lue totals from all pages.	\$184,262.00		
Part 2:	List Others to Be No	otified for a Debt Th	at You Already Listed			
trying to than one	collect from you for a d	lebt you owe to someo debts that you listed ir	ne else, list the creditor in Pa	bt that you already listed in Part 1. For example, if a collection agenart 1, and then list the collection agency here. Similarly, if you have editors here. If you do not have additional persons to be notified for	more	
	me, Number, Street, City ells Fargo Bank	, State & Zip Code		On which line in Part 1 did you enter the creditor?		
	0 Montgomery Stan Francisco, CA 9			Last 4 digits of account number		

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	Case 5.17-br	1-04213-JAI	DUCT THEU 121.	II/I/ Fage	20 01 34	
Fill in this	information to identify your cas	e:				
Debtor 1	Carlos Alberto Lindo					
Dobtor :	First Name	Middle Name	Last Name			
Debtor 2	ng) First Nome	Middle Nome	Lost Nama			
(Spouse if, filin	-	Middle Name	Last Name			
United Sta	ites Bankruptcy Court for the:	IIDDLE DISTRICT OF	FLORIDA			
Case num	ber					
(if known)					_	if this is an
					ameno	ded filing
Official	Form 106E/F					
	ule E/F: Creditors Who	Have Unsec	ured Claims			12/15
Schedule G: Schedule D: left. Attach t	ory contracts or unexpired leases that: Executory Contracts and Unexpired: Creditors Who Have Claims Secured: The Continuation Page to this page. If the continuation Page to th	I Leases (Official Form d by Property. If more s	106G). Do not include any cr space is needed, copy the Pa	reditors with partially s irt you need, fill it out,	secured claims that a number the entries i	are listed in n the boxes on the
Part 1:	List All of Your PRIORITY Unsec	cured Claims				
_ `	creditors have priority unsecured cl	aims against you?				
_	Go to Part 2.					
Yes	of your priority unsecured claims. If	19 1		Parallel Programme		
possible Part 1.	what type of claim it is. If a claim has be e, list the claims in alphabetical order ad If more than one creditor holds a particular explanation of each type of claim, see	ccording to the creditor's ular claim, list the other of	name. If you have more than to creditors in Part 3.		aims, fill out the Conti	nuation Page of Nonpriority
2.1 In	ternal Revenue Service	Last 4 digits	of account number 5990	\$3,005.00	amount \$3,005.00	amount \$0.00
	iority Creditor's Name		Ji account number 3990	φ3,003.00	φ3,003.00	
14	0'4	When was the	e debt incurred?		_	
	ansas City, MO 64999-0202 Imber Street City State Zlp Code	As of the date	e you file, the claim is: Check	all that apply		
Who i	incurred the debt? Check one.	☐ Contingent	-	,		
■ De	ebtor 1 only	☐ Unliquidate	ed			
☐ De	ebtor 2 only	□ Disputed				
☐ De	ebtor 1 and Debtor 2 only	•	RITY unsecured claim:			
□ At	least one of the debtors and another	☐ Domestic s	support obligations			
□сн	neck if this claim is for a community	debt Taxes and	certain other debts you owe the	e government		
Is the	claim subject to offset?		death or personal injury while y	•		
■ No		☐ Other. Spe	cify			
☐ Ye	es		income taxes			
Part 2:	List All of Your NONPRIORITY U	Insecured Claims				
	creditors have nonpriority unsecure					
^	You have nothing to report in this part.		court with your other schedules			
■ Yes			out man your outer concounce.	•		
unsecui	of your nonpriority unsecured claim red claim, list the creditor separately for e creditor holds a particular claim, list the	each claim. For each cl	aim listed, identify what type of	claim it is. Do not list cl	aims already included	in Part 1. If more

Total claim

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Debtor 1 Carlos Alberto Lindo				
4.1	Acceptance Now Nonpriority Creditor's Name	Last 4 digits of account number	0283	\$1,466.00
	Attn: Bankruptcy 5501 Headquarters Dr Plano, TX 75024	When was the debt incurred?	Opened 04/16 Last Active 8/04/17	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	□ Yes	Other. Specify Rental Agre		
4.2	Ar Resources Inc Nonpriority Creditor's Name	Last 4 digits of account number	5544	\$950.00
	Bankruptcy Po Box 1056 Blue Bell, PA 19422	When was the debt incurred?	Opened 4/08/15 Last Active 11/14	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	■ Other. Specify Collection Resources	Account - medical - Emergency Group	
4.3	Bank of America Nonpriority Creditor's Name	Last 4 digits of account number		\$0.00
	P.O. Box 25118 Tampa, FL 33622-5118	When was the debt incurred?		
	Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.	_		
	Debtor 1 only	Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed	d eleter.	
	At least one of the debtors and another	Type of NONPRIORITY unsecured	a claim:	
	☐ Check if this claim is for a community debt	Student loans	and a second and the second as	
	Is the claim subject to offset?	 Obligations arising out of a separe report as priority claims 	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	□Yes	Other. Specify		

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Debtor 1 Carlos Alberto Lindo		Case number (if know)				
4.4	Citi Card Svc. Center Nonpriority Creditor's Name	Last 4 digits of account number		\$1,350.00		
	for Sears P O Box 6275	When was the debt incurred?				
	Sioux Falls, SD 57117 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
	■ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
	☐ Check if this claim is for a community debt	☐ Student loans☐ Obligations arising out of a sep.	aration agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims				
	No	Debts to pension or profit-sharing				
	Yes	Other. Specify Credit card	d purchases			
4.5	Comcast	Last 4 digits of account number		\$431.65		
	Nonpriority Creditor's Name 4600 Touchton Road E. Suite 2500	When was the debt incurred?				
	Jacksonville, FL 32246					
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply			
	Who incurred the debt? Check one.					
	Debtor 1 only	Contingent				
	Debtor 2 only	Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	d claim:			
	☐ At least one of the debtors and another	Student loans	u ciaiii.			
	☐ Check if this claim is for a community debt	_	aration agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims	aration agreement of avoice that you did not			
	■ No	Debts to pension or profit-sharing				
	□Yes	Other. Specify open acco	unt			
4.6	Discover Financial	Last 4 digits of account number	2221	Unknown		
	Nonpriority Creditor's Name Po Box 3025	When was the debt incurred?	Opened 01/96 Last Active 01/16			
	New Albany, OH 43054 Number Street City State Zlp Code	As of the date you file, the claim	is: Chack all that apply			
	Who incurred the debt? Check one.	As of the date you me, the claim	15. Check all that apply			
	■ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure				
	☐ Check if this claim is for a community	☐ Student loans				
	debt		aration agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-shari	og plane, and other similar debte			
	■ No					
	Yes	Other. Specify Credit Care	<u> </u>			

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Debtor	1 Carlos Alberto Lindo	Case number (if know)			
4.7	Florida Publishing Co. Nonpriority Creditor's Name	Last 4 digits of account number	\$0.00		
	P.O. BOX 1928 Augusta, GA 30903	When was the debt incurred?			
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.				
	■ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts			
	Yes	Other. Specify			
4.8	Ford Motor Credit	Last 4 digits of account number 1357	\$0.00		
	Nonpriority Creditor's Name PO BOX 790119 Saint Louis, MO 63179	When was the debt incurred?	· · · · · · · · · · · · · · · · · · ·		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.				
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	Student loans			
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims			
	No	□ Debts to pension or profit-sharing plans, and other similar debts			
	Yes	Other. Specify			
4.9	LVNV Funding LLC Nonpriority Creditor's Name	Last 4 digits of account number	\$1,659.00		
	for Citibank	When was the debt incurred?			
	Po Box 10497				
	Greenville, SC 29603	_			
	Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.				
	Debtor 1 only	Contingent			
	Debtor 2 only	Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	Check if this claim is for a community	□ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts			
	☐ Yes	■ Other Specify collection account/Citibank			
		— Outer, Specify			

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Debtor	1 Carlos Alberto Lindo	Case number (if know)							
4.1 0	Mid America Apt Comm	Last 4 digits of account number	2213	\$0.00					
	Nonpriority Creditor's Name c/o Brian Peter Wolk 17264 San Carlos Blvd St 307	When was the debt incurred?							
	Fort Myers Beach, FL 33931 Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply						
	Who incurred the debt? Check one.								
	■ Debtor 1 only	☐ Contingent							
	☐ Debtor 2 only	☐ Unliquidated							
	☐ Debtor 1 and Debtor 2 only	☐ Disputed							
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:						
	\square Check if this claim is for a community	☐ Student loans							
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not						
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts						
	Yes	Other. Specify							
4.1	Receivables Performance Mgmt	Last 4 digits of account number	0739	\$0.00					
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 1548	When was the debt incurred?	Opened 4/21/14 Last Active 07/13						
	Lynnwood, WA 98036 Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply						
	Who incurred the debt? Check one.	,							
	■ Debtor 1 only	☐ Contingent							
	☐ Debtor 2 only	☐ Unliquidated	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	Disputed							
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured							
	☐ Check if this claim is for a community	☐ Student loans							
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims							
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts						
	Yes	Other. Specify Dish							
4.1	SportNoblesConstructionInc	Last 4 digits of account number		\$43,000.00					
	Nonpriority Creditor's Name 4716 Palmer Avenue	When was the debt incurred?		· · ·					
	Jacksonville, FL 32210 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply						
	■ Debtor 1 only	☐ Contingent							
	☐ Debtor 2 only	☐ Unliquidated							
	Debtor 1 and Debtor 2 only	Disputed							
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	Type of NONPRIORITY unsecured claim:						
	☐ Check if this claim is for a community	☐ Student loans							
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not						
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts							
	Yes								

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Debto	Carlos Alberto Lindo		Case number (if know)						
4.1	Synchrony Bank	Last 4 digits of account number	1983	\$0.00					
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 965060	When was the debt incurred?							
	Orlando, FL 32896 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim							
	Debtor 1 only	O continuent							
	Debtor 2 only	☐ Contingent ☐ Unliquidated							
	_	_ '							
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured	1 claim:						
	At least one of the debtors and another	Student loans	a Glaiiii.						
	☐ Check if this claim is for a community debt Is the claim subject to offset?	_	ration agreement or divorce that you did not						
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts						
	Yes								
4.1	Synchrony Bank/ HH Gregg	Last 4 digits of account number	4200	\$0.00					
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 965060 Orlando, FL 32896	When was the debt incurred?	Opened 07/05 Last Active 03/06						
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply						
	Who incurred the debt? Check one.	•	,						
	Debtor 1 only	☐ Contingent							
	Debtor 2 only	☐ Unliquidated	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	Disputed							
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured							
	☐ Check if this claim is for a community	☐ Student loans	☐ Student loans						
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not						
	No	Debts to pension or profit-sharing	g plans, and other similar debts						
	Yes	Other. Specify							
4.1 5	UF Health Physicians	Last 4 digits of account number		\$131.84					
	Nonpriority Creditor's Name P O Box 44008 Jacksonville, FL 32231-4008	When was the debt incurred?							
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply						
	■ Debtor 1 only	☐ Contingent							
	Debtor 2 only	☐ Unliquidated							
	☐ Debtor 1 and Debtor 2 only	☐ Disputed							
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:						
	☐ Check if this claim is for a community debt		ration agreement or divorce that you did not						
	Is the claim subject to offset?	report as priority claims	riority claims o pension or profit-sharing plans, and other similar debts						
	No								
	☐ Yes	Other. Specify medical set	rvices						

Part 3: List Others to Be Notified About a Debt That You Already Listed

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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Debtor 1 Carlos Alberto Lindo		Case number (if know)				
Name and Address Arnold D. Tritt, Jr. for Sports Noble 707 Peninsular Place Jacksonville, FL 32204	On which entry in Part 1 or Part 2 did Line 4.12 of (<i>Check one</i>):	you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims				
	Last 4 digits of account number					
Name and Address Citi Card Svc. Center P O Box 6275 Sioux Falls, SD 57117	On which entry in Part 1 or Part 2 did Line 4.9 of (Check one): Last 4 digits of account number	you list the original creditor? □ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims				
Name and Address Emergency Resources Group PO Box 11349 Daytona Beach, FL 32120	On which entry in Part 1 or Part 2 did Line 4.2 of (<i>Check one</i>): Last 4 digits of account number	you list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims				

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				T	otal Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total				-	
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	3,005.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	3,005.00
	6f.	Otrodont Lours	Ct.		otal Claim
Total	о.	Student loans	6f.	\$	0.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	48,988.49
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	48,988.49

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Fill in this inform	nation to identify your	case:		1
Debtor 1	Carlos Alberto Li	ndo		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bar	nkruptcy Court for the:	MIDDLE DISTRICT OF	FLORIDA	
Case number _				
(if known)				Check if this is an
				amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

-	Person or	Company with Name, Number	whom you have the r, Street, City, State and ZIF	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			
	City		State	ZIP Code	<u> </u>
2.2					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	_
2.3					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	_
2.4					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	
2.5	-				
	Name				
	Number	Street			_
	City		State	ZIP Code	<u> </u>

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				_, _ , _ , _ , _ ,	
Fill in this	s information to identify your	case:			
Debtor 1	Carlos Alberto Li	ndo			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, fili	ing) First Name	Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the:	MIDDLE DISTRICT OF	FLORIDA		
Case num	ber				
(if known)					Check if this is an amended filing
0.00	15 40011				3
	I Form 106H	• .			
Sched	dule H: Your Cod	<u>ebtors</u>			12/15
people are fill it out, a your name	s are people or entities who a e filing together, both are equ and number the entries in the e and case number (if known) you have any codebtors? (If	ally responsible for supp boxes on the left. Attach Answer every question	olying correct information of the Additional Page to the	. If more space is need is page. On the top of	ed, copy the Additional Page,
□ No					
■ Ye:					
	thin the last 8 years, have you na, California, Idaho, Louisiana,				ates and territories include
	. Go to line 3. s. Did your spouse, former spor	use, or legal equivalent live	e with you at the time?		
in line Form	e 2 again as a codebtor only i	f that person is a guaran	tor or cosigner. Make sur	e you have listed the c	th you. List the person shown reditor on Schedule D (Official edule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and Z	P Code		Column 2: The creditor Check all schedules the	or to whom you owe the debt at apply:
0.4					
3.1	Linda Lindo			Schedule D, line	
				☐ Schedule E/F, line ☐ Schedule G	e
				Nationstar Mortgag	e LLC
3.2	Linda Lindo			■ Schedule D, line	
				☐ Schedule E/F, line	
				☐ Schedule G	_
				SportNoblesConstr	uctioninc

Fill	in this information to identify your	case:								
Del	btor 1 Carlos Alb	erto Lindo			_					
	btor 2 puse, if filing)				_					
Uni	ited States Bankruptcy Court for the	ne: MIDDLE DISTRICT C	F FLORIDA		_					
	se number nown)		-			□ An		d filing		petition chapter g date:
0	fficial Form 106l					M	M / DD/ Y	YYY		
S	chedule I: Your Inc	come								12/1
sup spo atta	as complete and accurate as population of the po	ou are married and not filit our spouse is not filing w n. On the top of any additi	ng jointly, and your s _l ith you, do not includ	pòuse i e infori	is liv matio	ing with yon about	ou, incli your spo	ude inforn ouse. If mo	nation ore sp	about your ace is needed,
1.	Fill in your employment information.		Debtor 1				Debtor 2	or non-fi	ling s _l	pouse
	If you have more than one job,	Employment status	■ Employed				☐ Emplo	oyed		
	attach a separate page with information about additional	arate page with		☐ Not employed			☐ Not e	mployed		
	employers.	Occupation	Hair Stylist							
	Include part-time, seasonal, or self-employed work.	Employer's name	self							
	Occupation may include studen or homemaker, if it applies.	t Employer's address								
		How long employed t	here?				_			
Pai	rt 2: Give Details About M	onthly Income								
	mate monthly income as of the use unless you are separated.	date you file this form. If	you have nothing to rep	oort for	any I	line, write	\$0 in the	space. Inc	clude y	our non-filing
	ou or your non-filing spouse have to e space, attach a separate sheet		ombine the information	for all e	emplo	oyers for th	hat perso	n on the li	nes be	low. If you need
						For Debt	tor 1	For Del non-fili		
2.	List monthly gross wages, sa deductions). If not paid monthly			2.	\$		0.00	\$		N/A
3.	Estimate and list monthly over	ertime pay.		3.	+\$		0.00	+\$		N/A

0.00

\$

N/A

Calculate gross Income. Add line 2 + line 3.

Deb	tor 1	Carlos Alberto Lindo	-	Ca	se number (if know	n)				
					or Debtor 1			Debtor filing s	2 or pouse	
	Cop	y line 4 here	4.	\$	0.0	0	\$		N/A	
5.	List	all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	5a	. \$	0.0	٥	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b				\$		N/A	
	5c.	Voluntary contributions for retirement plans	5c.				\$		N/A	
	5d.	Required repayments of retirement fund loans	5d	. \$		_	\$		N/A	
	5e.	Insurance	5e	. \$	0.0	0	\$		N/A	
	5f.	Domestic support obligations	5f.				\$		N/A	
	5g.	Union dues	5g			_	\$		N/A	
	5h.	Other deductions. Specify:	_ 5h	.+ \$	0.0	0	+ \$		N/A	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	0.0	0	\$		N/A	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	0.0	0	\$		N/A	
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a	. \$	700.0	0	\$		N/A	
	8b.	Interest and dividends	8b	. \$	0.0	0	\$		N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	. \$	216.0	0	\$		N/A	
	8d.	Unemployment compensation	8d	. \$	0.0	0	\$		N/A	
	8e.	Social Security	8e	. \$	0.0	0	\$		N/A	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.				\$		N/A	
	8g.	Pension or retirement income	8g		- 0.0				N/A	
	8h.	Other monthly income. Specify:	_ 8h	.+ \$	0.0	<u> </u>	+ \$		N/A	_
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$_	916.0	0	\$		N/A	
10	Calc	culate monthly income. Add line 7 + line 9.	10.	\$	916.00 +	\$		N/A	= \$	916.00
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		Ψ	310.00	Ψ_		11//	-	310.00
11.	Stat Incli	te all other regular contributions to the expenses that you list in Schedule and contributions from an unmarried partner, members of your household, your per friends or relatives. In the contribution of the expenses that you list in Schedule and contributions from an unmarried partner, members of your household, your per friends or relatives.	depe					chedule 11.		0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certainies						12.	\$	916.00
13.	Do :	you expect an increase or decrease within the year after you file this form No.	?						Combin monthly	ed income
		Voc Evolain:								1

	in this informa-	-4: 4- :-l4:£								
		ation to identify yo				Oh a				
Deb	Carlos Alberto Lindo						Check if this is:			
	otor 2 ouse, if filing)					☐ A supplement showing postpetition chapter 13 expenses as of the following date:				
Unit	ted States Bank	ruptcy Court for the:	: MIDDL	E DISTRICT OF FLORID	Α		MM / DD / YYYY			
	se number									
(If k	nown)									
O	fficial Fo	orm 106J								
S	chedule	J: Your I	Exper	ises				12/1		
Be info	as complete ormation. If n	and accurate as	possible eded, atta	If two married people a						
Par 1.	t 1: Desc	ribe Your House	hold							
١.	■ No. Go t									
		es Debtor 2 live i	n a separ	ate household?						
			st file Offici	al Form 106J-2, <i>Expense</i>	es for Separate House	hold of Del	btor 2.			
2.		e dependents?	□ No		·					
	-	Debtor 1 and	Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor		Dependent's age	Does dependent live with you?		
	Do not state	e the						□ No		
	dependents	names.			grandson			■ Yes □ No		
					grandson		18	■ Yes		
					son (student)		20	□ No ■ Yes		
					daughter		adult	□ No ■ Yes		
3.		penses include		No				– res		
		of people other th ad your depender	^{han} ┌┐	Yes						
exp	imate your e	a date after the b	our bankr	uptcy filing date unless				apter 13 case to report of the form and fill in the		
the		h assistance and		government assistance luded it on <i>Schedule I:</i>			Your exp	enses		
,σ.		· · · · · · · · · · · · · · · · · · ·								
4.		or home owners nd any rent for the		ses for your residence. r lot.	Include first mortgage	4.	\$	1,759.00		
	If not inclu	ded in line 4:								
	4a. Real	estate taxes				4a.	\$	0.00		
		erty, homeowner's				4b.	·	0.00		
		e maintenance, re eowner's associat				4c. 4d.	·	250.00 0.00		
5.				our residence, such as h	ome equity loans	4u. 5.		0.00		

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Debtor 1	Carlos A	lberto Lindo	Case num	ber (if known)	
S 114:1	litios				
6. Util 6a.	lities:	heat, natural gas	6a.	\$	350.00
6b.		wer, garbage collection	6b.	· ·	0.00
		e, cell phone, Internet, satellite, and cable services	6c.	·	
6c.	•			·	240.00
6d.		<u> </u>	6d.	· ·	0.00
		ekeeping supplies	7.	·	800.00
		children's education costs	8.	·	0.00
	-	ry, and dry cleaning	9.		50.00
		products and services	10.	·	25.00
		ntal expenses	11.	\$	150.00
	nsportation. not include ca	Include gas, maintenance, bus or train fare.	12.	\$	100.00
		clubs, recreation, newspapers, magazines, and books	13.	·	0.00
		ributions and religious donations	14.	· ·	0.00
	urance.	ributions and religious donations	14.	Ψ	0.00
-		surance deducted from your pay or included in lines 4 or 20.			
	i. Life insura		15a.	\$	0.00
	. Health ins		15b.	·	0.00
	. Vehicle in:		15c.	· -	0.00
		rance. Specify:	15d.	·	0.00
		iclude taxes deducted from your pay or included in lines 4 or 20.		Ť	<u> </u>
	ecify:	ionado taxoo doddotod from your pay or moludod in imos 4 01 20.	16.	\$	0.00
		ease payments:			
17a	i. Car paym	ents for Vehicle 1	17a.	\$	0.00
17b	. Car paymo	ents for Vehicle 2	17b.	\$	0.00
17c	. Other. Spe	ecify:	17c.	\$	0.00
17d	I. Other. Spe	ecify:	17d.	\$	0.00
		of alimony, maintenance, and support that you did not report			0.00
		your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 10	6I). 18.	· ·	0.00
9. Oth	er payments	s you make to support others who do not live with you.		\$	0.00
	ecify:		19.		
		erty expenses not included in lines 4 or 5 of this form or on S			
		s on other property	20a.	·	0.00
	. Real estat		20b.	· -	0.00
		homeowner's, or renter's insurance	20c.	·	0.00
		nce, repair, and upkeep expenses	20d.	·	0.00
20e	. Homeown	er's association or condominium dues	20e.	\$	0.00
1. O th	er: Specify:	pool service	21.	+\$	160.00
2. Cal	culate vour	monthly expenses			
	a. Add lines 4			\$	3,884.00
		2 (monthly expenses for Debtor 2), if any, from Official Form 106J	-2	\$	<u> </u>
		a and 22b. The result is your monthly expenses.	_	\$	2 004 00
220	. Auu iiile 22	a and 220. The result is your monthly expenses.		Φ	3,884.00
3. Cal	culate your	monthly net income.			
23a	. Copy line	12 (your combined monthly income) from Schedule I.	23a.	\$	916.00
23b	. Copy your	monthly expenses from line 22c above.	23b.	-\$	3,884.00
230		our monthly expenses from your monthly income.	00-	•	-2,968.00
	The result	is your monthly net income.	23c.	\$	-2,300.00
24 De	VOII OYPOCT	an increase or decrease in your expenses within the year afte	r vou file this	form?	
		an increase or decrease in your expenses within the year afte ou expect to finish paying for your car loan within the year or do you expect			or decrease because of a
		terms of your mortgage?	, sa. mongage		
	Yes.	Explain here:			

Fill in this info	rmation to identify your	case:			
Debtor 1	Carlos Alberto Li	ndo			
Dahtano	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	Sankruptcy Court for the:	MIDDLE DISTRICT OF	FLORIDA		
Case number					
(if known)	-				☐ Check if this is an amended filing
Official For	m 106Dec				
		ın Individual	Debtor's Scl	hedules	12/15
If two married p	people are filing together	r, both are equally respor	nsible for supplying corre	ect information.	
You must file th	nis form whenever vou fi	le hankruntov schedules	or amended schedules	Making a false staten	nent, concealing property, or
obtaining mone	ey or property by fraud in	n connection with a bank			or imprisonment for up to 20
years, or both.	18 U.S.C. §§ 152, 1341, 1	519, and 3571.			
Sig	gn Below				
Did you p	ay or agree to pay some	one who is NOT an attor	ney to help you fill out ba	ankruptcy forms?	
■ No	, , ,		, ,,	. ,	
_					
☐ Yes.	Name of person				uptcy Petition Preparer's Notice, and Signature (Official Form 119)
				200.0.0.0.0, 0	ana orginataro (omolari omi i ro)
		that I have read the sumi	mary and schedules filed	I with this declaration	and
that they a	re true and correct.				
X /s/ Ca	rlos Alberto Lindo		X		
	s Alberto Lindo		Signature of D	Debtor 2	
Signat	ure of Debtor 1				
Date	December 11, 2017		Date		

		nation to identify you									
De	ebtor 1	Carlos Alberto L	Middle Name	Last Name							
1	ebtor 2 ouse if, filing)	First Name	Middle Name	Last Name							
Ur	nited States Ba	nkruptcy Court for the:	MIDDLE DISTRICT OF F	LORIDA							
Ca	ise number										
1	(nown)				-	heck if this is an mended filing					
						-					
0	fficial Fo	rm 107									
St	atement	of Financial	Affairs for Individ	duals Filing for B	ankruptcy	4/16					
info	ormation. If m		attach a separate sheet to		equally responsible for sup y additional pages, write you						
	<u> </u>	,	arital Status and Where You	Lived Before							
1.	What is you	What is your current marital status?									
	☐ Married ■ Not mar										
2.	During the la	During the last 3 years, have you lived anywhere other than where you live now?									
	_	_									
	_	NoYes. List all of the places you lived in the last 3 years. Do not include where you live now.									
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Address:		Dates Debtor 2 lived there					
3. sta					ity property state or territory ico, Texas, Washington and W						
	■ No										
		ake sure you fill out <i>Scl</i>	hedule H: Your Codebtors (O	fficial Form 106H).							
Pa	rt 2 Explai	in the Sources of You	ır Income								
4.	Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.										
	□ No										
	Yes. Fill	I in the details.									
			Debtor 1		Debtor 2						
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)					
From January 1 of current year until the date you filed for bankruptcy:			☐ Wages, commissions, bonuses, tips	\$30,000.00	☐ Wages, commissions, bonuses, tips	,					
			Operating a business		☐ Operating a business						

Official Form 107

Der)(01 1 <u>Ca</u>	irios Aibe	to Lindo			Cas	e number (it known)		
				Debtor 1			Debtor 2		
				Sources of income Check all that apply.	(befo	s income re deductions and sions)	Sources of inc Check all that a		Gross income (before deductions and exclusions)
For last calendar year: (January 1 to December 31, 2016)		☐ Wages, commissions, bonuses, tips		\$43,609.00	☐ Wages, combonuses, tips	missions,			
				Operating a business			☐ Operating a	business	
5.	Include include and other winnings.	come regard public bene If you are fil	lless of wheth fit payments; ing a joint cas	e during this year or the two ter that income is taxable. Ex- pensions; rental income; inte te and you have income that	amples or rest; divi	of other income are a dends; money collec- ived together, list it of	alimony; child supp cted from lawsuits; only once under De	royalties; a ebtor 1.	
	□ No ■ Yes.	Fill in the de	etails.						
				D. ()			5.17		
				Debtor 1 Sources of income Describe below.	each (befo	s income from source re deductions and sions)	Debtor 2 Sources of inc Describe below		Gross income (before deductions and exclusions)
		/ 1 of curre	nt year until	Child Support	o,toro	\$2,592.00			
		individual	primarily for a	Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by a personal, family, or household purpose." fore you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more?					
		□ Yes	paid that cre not include	each creditor to whom you pa editor. Do not include paymen payments to an attorney for t	nom you paid a total of \$6,425* or more in one or more payments and the total amount you ude payments for domestic support obligations, such as child support and alimony. Also, do torney for this bankruptcy case.				
	■ Yes.	* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?							
		■ No.	Go to line 7						
	Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.								
	Creditor'	s Name an	d Address	Dates of payme	ent	Total amount paid	Amount you still owe	Was this	payment for
7.	Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporation of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.								
	■ No □ Yes.	l ist all navr	nents to an in	sider					
		Name and		Dates of payme	ent	Total amount	Amount you	Reason f	or this payment
						paid	still owe		

8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an

Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy page 2

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Debte	or 1 Carlos Alberto Lindo	Case number (if known)								
	nsider?	ionad by an incider								
II	Include payments on debts guaranteed or cosigned by an insider.									
	■ No									
	Yes. List all payments to an insider									
	Insider's Name and Address	Dates of payment	Total amount Amount yo							
Part	4: Identify Legal Actions, Repossession	s, and Foreclosures								
L	Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.									
	□ No									
ı	Yes. Fill in the details.									
	Case title Case number	Nature of the case	Court or agency		Status of the case					
	Lindo v. Lindo	Dissolution of	Duval Circuit		☐ Pending					
	16-2016-DR-009037-FM	Marriage			☐ On appeal					
					Conclude	ed				
_	Lindo v. Lindo	Support	Duval Circuit		☐ Pending					
	16-2015-DR-004106				☐ On appeal					
					Conclude	ed .				
_	Sports Nobles Construction v.	foreclosure St. Johns County Circuit		ircuit	☐ Pending					
	Lindo CA16-13				☐ On appeal					
	CA 16-13				Conclude	ed				
	Wells Fargo v. Lindo	foreclosure	St. Johns Circuit		■ Pending					
	CA 17-1172				☐ On appea	al				
					☐ Conclude	ed .				
-	Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11.									
I	Yes. Fill in the information below.									
	Creditor Name and Address			Date		Value of the property				
	SportNobles Construction Inc	Explain what happened				¢0.00				
	SportNoblesConstructionInc foreclosed on home in 11/2017 4716 Palmer Avenue					\$0.00				
	Jacksonville, FL 32210	Property was repossessed.								
		■ Property was foreclosed.□ Property was garnished.								
		, , ,								
		☐ Property was attached, seized or levied.								

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Case number (if known)

	Creditor Name and Address	Describe the Property	Date	Value of the
		Explain what happened		property
	Bank of America P.O. Box 25118	foreclosed home on 11434 Warrior Way, Jacksonville, FL	2/2015	\$0.00
	Tampa, FL 33622-5118	☐ Property was repossessed.		
		■ Property was foreclosed.		
		☐ Property was garnished.		
		☐ Property was attached, seized or levied.		
11.	Within 90 days before you filed for bank accounts or refuse to make a payment border No ☐ Yes. Fill in the details.	ruptcy, did any creditor, including a bank or financi ecause you owed a debt?	ial institution, set off any	amounts from your
	Creditor Name and Address	Describe the action the creditor took	Date action was taken	Amount
	court-appointed receiver, a custodian, o ■ No □ Yes	iptcy, was any of your property in the possession or another official?	5	
Par	t 5: List Certain Gifts and Contribution	ns		
13.	Within 2 years before you filed for banks ■ No □ Yes. Fill in the details for each gift.	ruptcy, did you give any gifts with a total value of m	ore than \$600 per person	?
	Gifts with a total value of more than \$60 per person	Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:			
14.	Within 2 years before you filed for bank	ruptcy, did you give any gifts or contributions with	a total value of more than	\$600 to any charity?
	No			
	Yes. Fill in the details for each gift or o			
	Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Cod	ŕ	Dates you contributed	Value
Par	t 6: List Certain Losses			
15.	Within 1 year before you filed for bankru or gambling?	ptcy or since you filed for bankruptcy, did you lose	anything because of the	ft, fire, other disaster
	■ No			
	Yes. Fill in the details.			
	Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pend insurance claims on line 33 of Schedule A/B: Property		Value of property lost

Debtor 1 Carlos Alberto Lindo

Debtor 1 Carlos Alberto Lindo

Case number (if known)

Pai	t 7: List Certain Payments or Transfers							
16.	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.							
	□ No							
	Yes. Fill in the details.							
	Person Who Was Paid Address Email or website address	Description and v transferred	alue of any prope	rty	Date payment or transfer was made	Amount of payment		
	Person Who Made the Payment, if Not You				maao			
	Law Offices of Mickler & Mickler, LLP 5452 Arlington Expy. Jacksonville, FL 32211	9/29/2017	\$485.00					
17.	Within 1 year before you filed for bankruptcy, promised to help you deal with your creditors Do not include any payment or transfer that you li No	or to make payments			r transfer any prope	rty to anyone who		
	Yes. Fill in the details.							
	Person Who Was Paid Address	Description and value of any property transferred			Date payment or transfer was made	Amount of payment		
	transferred in the ordinary course of your bus Include both outright transfers and transfers made include gifts and transfers that you have already I No Yes. Fill in the details.	e as security (such as t	he granting of a sec	curity interest	or mortgage on your	property). Do not		
	Person Who Received Transfer	Description and v	value of	Doscribo a	ny property or	Date transfer was		
	Address	property transferred pa			received or debts	made		
	Person's relationship to you							
19.	Within 10 years before you filed for bankruptc beneficiary? (These are often called asset-prote No Yes. Fill in the details.		y property to a se	lf-settled tru	st or similar device	of which you are a		
		···· · · · · · · · · · · · · · · · · ·	.al	Data Transfer was				
	Name of trust	Description and v	Description and value of the property transferred Date Trai made			Date Transfer was made		
Pai	tt 8: List of Certain Financial Accounts, Instr	uments, Safe Deposit	Boxes, and Stora	ige Units				
20.	Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage							
	houses, pension funds, cooperatives, associa No	mons, and other illiar	ıcıdı IIISLILULIOIIS.					
	Yes. Fill in the details.							
		ast 4 digits of account number	Type of account instrument	clos	e account was sed, sold, ved, or nsferred	Last balance before closing or transfer		

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Debtor 1	Carlos	Alberto	Linda

Case number (if known)

21.	1. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?				
	■ No □ Yes. Fill in the details.				
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?	
22.	Have you stored property in a storage unit or p	lace other than your home within 1	year before you filed for bankruptcy?	•	
	■ No □ Yes. Fill in the details.				
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?	
Par	t 9: Identify Property You Hold or Control for	Someone Else			
23.	Do you hold or control any property that some for someone.	one else owns? Include any prope	rty you borrowed from, are storing for	or hold in trust	
	□ No■ Yes. Fill in the details.				
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value	
	Daughter (adult)	Debtor's residence	bed and dresser, personal effects	\$0.00	
	Son, student (age 20)	debtor's residence	bed, dresser, bicycle, personal effects	\$0.00	
	Friend	Debtor's residence	bed and dresser	\$0.00	
	Mom of Grandson		clothes and kithen items in \$50 home		
Par	t 10: Give Details About Environmental Inform	ation			
For	the purpose of Part 10, the following definitions	apply:			
	Environmental law means any federal, state, or toxic substances, wastes, or material into the a regulations controlling the cleanup of these su	ir, land, soil, surface water, ground	- ·		
	Site means any location, facility, or property as to own, operate, or utilize it, including disposal		law, whether you now own, operate, o	r utilize it or used	
	Hazardous material means anything an environ hazardous material, pollutant, contaminant, or		s waste, hazardous substance, toxic s	ubstance,	
Rep	ort all notices, releases, and proceedings that y	ou know about, regardless of whe	n they occurred.		
24.	Has any governmental unit notified you that yo	u may be liable or potentially liable	e under or in violation of an environme	ntal law?	
	■ No □ Yes. Fill in the details.				
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice	

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Debtor 1	Carlos	Alberto	l indo

Case number (if known)

25.	Have you notified any governmental unit of any release of hazardous material?							
		No Yes. Fill in the details.						
		nme of site Idress (Number, Street, City, State and ZIP Co	ode)	Governmental unit Address (Number, Street, City, State an ZIP Code)	nd	Environmental law, if you know it	Date of notice	
26.	Hav	ve you been a party in any judicial o	r adm	inistrative proceeding under any env	ironr	mental law? Include settlements a	and orders.	
		No Yes. Fill in the details.						
		se Title se Number		Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nat	ture of the case	Status of the case	
Par	t 11	Give Details About Your Busines	s or C	Connections to Any Business				
27.	Wit	hin 4 years before you filed for ban	krupto	cy, did you own a business or have a	ny of	the following connections to any	business?	
		■ A sole proprietor or self-emplo	yed in	a trade, profession, or other activity	, eith	er full-time or part-time		
		☐ A member of a limited liability	compa	any (LLC) or limited liability partnersh	nip (L	LP)		
		☐ A partner in a partnership						
		☐ An officer, director, or managin	ng exe	ecutive of a corporation				
		☐ An owner of at least 5% of the	voting	or equity securities of a corporation				
	☐ No. None of the above applies. Go to Part 12.							
	Yes. Check all that apply above and fill in the details below for each business.							
	Business Name Address (Number, Street, City, State and ZIP Code)				Employer Identification number Do not include Social Security number or ITIN.			
	(,,,,		Name of accountant or bookkeeper		Dates business existed		
	d/b/a hair dresser		hair dresser		EIN:			
						From-To 1978-		
28.		hin 2 years before you filed for ban titutions, creditors, or other parties	-	cy, did you give a financial statement	to ar	nyone about your business? Inclu	ide all financial	
		No Yes. Fill in the details below.						
	Ac	nme Idress mber, Street, City, State and ZIP Code)		Date Issued				
Par	t 12	Sign Below						
are t	rue a b	and correct. I understand that make	ing a f	ancial Affairs and any attachments, an false statement, concealing property, (250,000, or imprisonment for up to 20	or o	btaining money or property by fra		
	_	los Alberto Lindo		.				
		Alberto Lindo ure of Debtor 1		Signature of Debtor 2				
Dat	е	December 11, 2017		Date				
■ N	0	attach additional pages to Your Sta	itemei	nt of Financial Affairs for Individuals	Filin	g for Bankruptcy (Official Form 10	07)?	
☐ Y Offici		orm 107 S	tateme	ent of Financial Affairs for Individuals Filin	g for l	Bankruptcy	page 7	

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Debtor 1	Carlos Alberto Lindo	Case number (if known)				
Did you na	id you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?					
■ No	ay or agree to pay someone who is not an attorney to help you init out ba	initiapitely forms:				
	ame of Person Attach the Bankruptcy Petition Preparer's Notice, Decl	aration, and Signature (Official Form 119).				

Fill in this infor	mation to identify ye	our case:			
Debtor 1	Carlos Alberto	Lindo			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	ankruptcy Court for th	e: MIDDLE DISTRICT OF	FLORIDA		
Case number					
(if known)					if this is an ed filing
					oug
Official Fo	orm 108				
Stateme	nt of Intent	ion for Individu	ıals Filing Unde	r Chapter 7	12/15
If you are an inc	lividual filing under	chapter 7, you must fill out t	his form if:		
creditors have	e claims secured by	your property, or			
You must file th	is form with the cou		le your bankruptcy petition o	r by the date set for the meeting nd copies to the creditors and le	

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	t Did you claim the property as exempt on Schedule C?		
Creditor's Nationstar Mortgage LLC	■ Surrender the property.	■ No		
Description of property Securing debt: 1256 Tangerine Drive Saint Johns, FL 32259 Saint Johns County foreclosed on 11/2017	 □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]: 	□Yes		
Creditor's SportNoblesConstructionInc	■ Surrender the property.	■ No		
name:	☐ Retain the property and redeem it.			
Description of property Securing debt: 1256 Tangerine Drive Saint Johns, FL 32259 Saint Johns County foreclosed on 11/2017	□ Retain the property and enter into a Reaffirmation Agreement.□ Retain the property and [explain]:	☐ Yes		

Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases

Will the lease be assumed?

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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Debtor 1 Carlos Alberto Lindo	Case number (if known)
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes

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Deb	otor 1	Carlos Alberto Lindo	Case number (if known)		
Part	3: Si	gn Below			
		ty of perjury, I declare that I have indicate t is subject to an unexpired lease.	d my intention about any property of my estate that secures a debt and any personal		
Х	/s/ Car	rlos Alberto Lindo	X		
^	Carlos Alberto Lindo		Signature of Debtor 2		
	Carlos		Signature of Debtor 2		
			Signature of Debtor 2		

Fill i	n this information to identify your case:		Ch	eck one box only as	directed in this form and	in Form
Deb	tor 1 Carlos Alberto Lindo		122	2A-1Supp:		
	tor 2			1. There is no pre-	sumption of abuse	
Unit	ed States Bankruptcy Court for the: Middle District of	Florida	[applies will be	to determine if a presumade under Chapter 7	•
Cas (if kno	e number own)		1	☐ 3. The Means Tes	fficial Form 122A-2).	
					ry service but it could ap	ріу іасег.
	icial Form 122A - 1			☐ Check if this is a	an amended ming	
Ch	apter 7 Statement of Your Cu	rrent Monthl	y Inc	ome		12/15
attacl case	complete and accurate as possible. If two married people in a separate sheet to this form. Include the line number to number (if known). If you believe that you are exempted friging military service, complete and file Statement of Exemple 1: Calculate Your Current Monthly Income	which the additional info om a presumption of abu	rmation a	applies. On the top of a se you do not have pr	any additional pages, wri imarily consumer debts o	te your name and or because of
1.	What is your marital and filing status? Check one of	only.				
	■ Not married. Fill out Column A, lines 2-11.					
	☐ Married and your spouse is filing with you. Fill o	out both Columns A and	B, lines	2-11.		
	☐ Married and your spouse is NOT filing with you					
	☐ Living in the same household and are not leg	jally separated. Fill out	both Co	lumns A and B, lines	2-11.	
	☐ Living separately or are legally separated. Fill penalty of perjury that you and your spouse are living apart for reasons that do not include evadents.	legally separated unde	r nonban	kruptcy law that appl	lies or that you and you	
10 th	ill in the average monthly income that you received from al 01(10A). For example, if you are filing on September 15, the 6- e 6 months, add the income for all 6 months and divide the tot bouses own the same rental property, put the income from that	month period would be Mai al by 6. Fill in the result. Do	rch 1 throu not includ	ugh August 31. If the am de any income amount r	nount of your monthly incom more than once. For examp	ne varied during ble, if both
				Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
2.	Your gross wages, salary, tips, bonuses, overtime payroll deductions).	, and commissions (be	efore all	\$ 0.00	\$	
3.	Alimony and maintenance payments. Do not includ Column B is filled in.	e payments from a spou	ıse if	\$ 0.00	\$	
4.	All amounts from any source which are regularly por you or your dependents, including child suppor from an unmarried partner, members of your househo and roommates. Include regular contributions from a stilled in. Do not include payments you listed on line 3.	t. Include regular contri ld, your dependents, pa	butions rents,	\$ 216.00	\$	
5.	Net income from operating a business, profession					
	- · · · · · · · · · · · · · · · · · · ·	Debtor 1 2,119.15				
	Gross receipts (before all deductions) \$ Ordinary and necessary operating expenses -\$	200.00				
	Ordinary and necessary operating expenses Net monthly income from a business, profession, or farm \$	1,919.15	Copy here ->	\$ 1,919.15	\$	
6.	Net income from rental and other real property	Debtor 1				
	Gross receipts (before all deductions)	\$ 0.00				
	Ordinary and necessary operating expenses	-\$ 0.00				
	Net monthly income from rental or other real property	\$ 0.00 Copy	here ->	· ———	\$	
7.	Interest, dividends, and royalties			\$ 0.00	\$	

Official Form 122A-1

ebtor 1 C	arlos Alberto Lindo			Case number	er (<i>if known</i>)			
				Column A Debtor 1		Column B Debtor 2 or non-filing s		
8. Unemp	ployment compensation			\$	0.00	\$		
Do not the Soc	enter the amount if you contend that the amoun cial Security Act. Instead, list it here:	t received was a bene	efit under					
For y	/ou \$ /our spouse \$	0	.00					
	on or retirement income. Do not include any an under the Social Security Act.	nount received that wa	as a	\$	0.00	\$		
Do not receive	e from all other sources not listed above. Speinclude any benefits received under the Social States as a victim of a war crime, a crime against huitic terrorism. If necessary, list other sources on a selow.	Security Act or payme manity, or internationa	nts al or					
				\$	0.00	\$		
				\$	0.00	\$		
	Total amounts from separate pages, if any.		+	\$	0.00	\$		
	ate your total current monthly income. Add lind blumn. Then add the total for Column A to the to		\$	2,135.15	+		= \$_	2,135.15
12. Calcula	Determine Whether the Means Test Applies to ate your current monthly income for the year copy your total current monthly income from line of the year.	. Follow these steps:		Cor	by line 11	here->	\$	2 125 15
12a. C	opy your total current monthly income from line	I I		O0t	y iiie i i	1616-2	Φ	2,135.15
M	ultiply by 12 (the number of months in a year)						X	
12b. Th	ne result is your annual income for this part of th	e form				12b.	\$	25,621.80
13. Calcula	ate the median family income that applies to	you. Follow these ste	ps:					
Fill in th	ne state in which you live.	FL						
Fill in th	ne number of people in your household.	1						
To find	ne median family income for your state and size a list of applicable median income amounts, go form. This list may also be available at the bank	online using the link	specified	in the separ	ate instruc	13. tions	\$	45,703.00
14. How d	o the lines compare?							
14a.	■ Line 12b is less than or equal to line 13. O Go to Part 3.	n the top of page 1, c	heck box	1, There is	no presun	nption of abuse).	
14b.	Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A-2.	of page 1, check box 2	2, The pr	esumption c	of abuse is	determined by	Form 1	22A-2.
art 3:	Sign Below							
	signing here, I declare under penalty of perjury	that the information of	on this sta	atement and	I in any att	achments is tru	ie and c	orrect.
Y	/s/ Carlos Alberto Lindo							
-	Carlos Alberto Lindo Signature of Debtor 1							
	December 11, 2017							
	MM / DD / YYYY							

Official Form 122A-1

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.

Case number (if known)

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 06/01/2017 to 11/30/2017.

Line 4 - Child support income (including foster care and disability)

Source of Income: child support

Income by Month:

6 Months Ago:	06/2017	\$216.00
5 Months Ago:	07/2017	\$216.00
4 Months Ago:	08/2017	\$216.00
3 Months Ago:	09/2017	\$216.00
2 Months Ago:	10/2017	\$216.00
Last Month:	11/2017	\$216.00
	Average per month:	\$216.00

Line 5 - Income from operation of a business, profession, or farm

Source of Income: **Hair Styling** Income/Expense/Net by Month:

	Date	Income	Expense	Net
6 Months Ago:	06/2017	\$2,804.37	\$200.00	\$2,604.37
5 Months Ago:	07/2017	\$2,196.13	\$200.00	\$1,996.13
4 Months Ago:	08/2017	\$2,508.21	\$200.00	\$2,308.21
3 Months Ago:	09/2017	\$964.29	\$200.00	\$764.29
2 Months Ago:	10/2017	\$2,058.34	\$200.00	\$1,858.34
Last Month:	11/2017	\$2,183.53	\$200.00	\$1,983.53
_	Average per month:	\$2,119.15	\$200.00	
			Average Monthly NET Income:	\$1,919.15

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

United States Bankruptcy Court Middle District of Florida

In re	Carlos Alberto Lindo	Debtor(s)	Case No. Chapter	7				
	VERIFICATION OF CREDITOR MATRIX							
he ab	ove-named Debtor hereby verifies th	nat the attached list of creditors is true and o	correct to the best	of his/her knowledge.				
Date:	December 11, 2017	/s/ Carlos Alberto Lindo						

Signature of Debtor

Carlos Alberto Lindo 1256 Tangerine Drive Saint Johns, FL 32259 Discover Financial Po Box 3025 New Albany, OH 43054 SportNoblesConstructionInc 4716 Palmer Avenue Jacksonville, FL 32210

Bryan K. Mickler FBN
Law Offices of Mickler & Mickler, LLP
5452 Arlington Expy.
Jacksonville, FL 32211

Emergency Resources Group PO Box 11349 Daytona Beach, FL 32120

Synchrony Bank Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Acceptance Now Attn: Bankruptcy 5501 Headquarters Dr Plano, TX 75024 Florida Publishing Co. P.O. BOX 1928 Augusta, GA 30903 Synchrony Bank/ HH Gregg Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Ar Resources Inc Bankruptcy Po Box 1056 Blue Bell, PA 19422 Ford Motor Credit PO BOX 790119 Saint Louis, MO 63179 UF Health Physicians P O Box 44008 Jacksonville, FL 32231-4008

Arnold D. Tritt, Jr. for Sports Noble 707 Peninsular Place Jacksonville, FL 32204

Internal Revenue Service Kansas City, MO 64999-0202 Wells Fargo Bank 420 Montgomery Street San Francisco, CA 94104

Bank of America P.O. Box 25118 Tampa, FL 33622-5118 LVNV Funding LLC for Citibank Po Box 10497 Greenville, SC 29603

Citi Card Svc. Center for Sears P O Box 6275 Sioux Falls, SD 57117 Mid America Apt Comm c/o Brian Peter Wolk 17264 San Carlos Blvd St 307 Fort Myers Beach, FL 33931

Citi Card Svc. Center P O Box 6275 Sioux Falls, SD 57117 Nationstar Mortgage LLC Attn: Bankruptcy 8950 Cypress Waters Blvd Coppell, TX 75019

Comcast 4600 Touchton Road E. Suite 2500 Jacksonville, FL 32246 Receivables Performance Mgmt Attn: Bankruptcy Po Box 1548 Lynnwood, WA 98036 B2030 (Form 2030) (12/15)

United States Bankruptcy Court Middle District of Florida

In re	Carlos Alberto	o Lind	0				Case No.		
					Debtor(s)		Chapter	7	
	DIS	SCLO	SURE OF COM	IPENSATI	ON OF AT	TORNEY	FOR DE	EBTOR(S)	
C	compensation paid to	o me wi	9(a) and Fed. Bankr. P ithin one year before the debtor(s) in contemple	ne filing of the p	etition in bankrı	uptcy, or agree	ed to be paid	to me, for service	
			ve agreed to accept					1,425.00	
	Prior to the filir	ng of thi	is statement I have reco	eived		\$		75.00	
	Balance Due					\$		1,350.00	
2.	The source of the co	mpensa	ation paid to me was:						
	Debtor		Other (specify):						
3.	The source of compe	ensation	n to be paid to me is:						
	Debtor		Other (specify):						
4.	■ I have not agreed	d to sha	are the above-disclosed	compensation v	with any other p	erson unless th	ney are mem	bers and associat	es of my law firm.
			he above-disclosed cor together with a list of t						my law firm. A
5.	In return for the abo	ve-disc	losed fee, I have agree	d to render lega	l service for all a	aspects of the l	oankruptcy c	ase, including:	
ł	 Preparation and f 	filing of	financial situation, and fany petition, schedule btor at the meeting of	es, statement of	affairs and plan	which may be	required;	-	oankruptcy;
	d. [Other provisions			creditors and co	niirmation neari	ing, and any ac	ijourned nea	rings thereor;	
			th secured creditor reements and appl						
			avoidance of liens of			ation and mi	ing or mon	ons pursuant	10 11 USC
6. I	By agreement with t	he debt	or(s), the above-disclo	sed fee does not	include the follo	lowing service:			
	Represen	tation	of the debtors in an sary proceeding.					es, relief from	stay actions or
				CERT	IFICATION				
	I certify that the fore ankruptcy proceeding		s a complete statement	t of any agreeme	ent or arrangeme	ent for paymen	t to me for re	epresentation of t	he debtor(s) in
D	ecember 11, 2017	7			/s/ Bryan K.	Mickler FRN			
	ate	<u>'</u>			Bryan K. Mic	ckler FBN 09			
					Signature of A Law Offices		Mickler I	I P	
					5452 Arlingt	on Expy.	·		
					Jacksonville	e, FL 32211			
					Name of law fi	ìrm			